# I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: A 1 RANDY LEJEUNE

Electronic Signature of Signing Authorized Person(s) Detail

ORLANDO, FL 32804

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: LEJEUNE HAIR AND MAKEUP ARTISTRY, LLC

## **Current Mailing Address:**

3531 EDGEWATER DR.

3531 EDGEWATER DR. ORLANDO, FL 32804 US

DOCUMENT# L07000026814

**Current Principal Place of Business:** 

# FEI Number: 55-0913547

### Name and Address of Current Registered Agent:

RANDY, LEJEUNE 3531 EDGEWATER DR. ORLANDO, FL 32804 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

#### SIGNATURE:

Electronic Signature of Registered Agent

### Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	LEJEUNE, RANDY	Name	LEJEUNE, PATRICIA
Address	3531 EDGEWATER DR.	Address	3531 EDGEWATER DR.
City-State-Zip:	ORLANDO FL 32804	City-State-Zip:	ORLANDO FL 32804

MGRM

Date

Certificate of Status Desired: No

FILED Jan 26, 2015 Secretary of State CC6994585558

01/26/2015

Date